FED 2.1 TEAM D

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

OR Declaration
Submitted after
Initial Filing-surcharge 37 CFR
1.16(e) required

Attorney Docket No.	02-CT-418/DP						
First Named Inventor	Giuseppe AVELLONE						
COMPLE	TE IF KNOWN						
Application Number	10/717,433						
Filing Date	November 18, 2003						
Group Art Unit							
Examiner Name							

As a below named Inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
METHOD AND DEVICE FOR SYNCHRONIZATION AND IDENTIFICATION OF THE CODEGROUP IN CELLULAR COMMUNICATION SYSTEMS AND COMPUTER PROGRAM PRODUCT THEREFOR									
the specification of which									
is attached hereto									
OR									
was filed on (MM/DD/YYYY)	11/18/2003	as U.S. Application PCT International	10/71	10/717,433					
and was amended on (MM/DD/YYYY)		(if applicable)							
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C § 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Appl. No.(s)		reign Filing Date MM/DD/YYYY)	Priority Not Claimed	Certified Cop Yes	y Attached? No				
TO2002 A 001082	IT	12/13/2002		Ø					
Additional foreign application nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.									
Application Number(s)	Filing Date (MM/DD/YYYY	')							

FEB 2.7 20%

DECLARATION – Utility or Design Patent Application

application of claims of this provided by to patentabil	lesignations application the first part in the f	nent under 3 ng the United tion is not dis paragraph of fined in 37 C CT internatio	States of a sclosed in to 35 U.S.C. FR 1.56 when	America the prior 112, I a nich bed	a, listed r United cknowle came av	belov State edge /ailab	w and, i es or Po the dut le betw	insofa CT in y to d	ar as the ternation lisclose i	subje nal app Informa	ct matte dication ation wh	r of e in the ich is	ach of the manner material	
U.S. Parent Application or PCT Parent No.					Parent Filing Date					Parent				
							(MM/D	UIYY		<u> </u>	(if ap	piica	DIE)	
		PCT interna												
As a named transact all t	inventor,	I hereby app	point the fo	llowing	registe	red pr	actition	ier(s)	to prose	ecute t	his appl	icatio	n and to	
☐ Custome			, riau c inai	OF		Jied I								
Register	ed practi	tioner(s) nam	ne/registrat		-	ed be	low							
	A)			Registration				A1					istration	
	Name	<u> </u>	- N	Number			V///	na	me			N	umber	
□ Addition	al rogieto	red practition	i l	ad on c	innleme	antal :	choot C	λΤΩ/S	SB/02C	attacho	d heret			
								10/0			Correspo		ra	
Direct all cor	respond	ence to: 🔯	Customer	Numbe	· 2	523			O,		address			
Name														
Address														
City	·						State Z			ZIP	ZIP			
Country			Telephor	ne l		Fa					ах			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of Sole or First Inventor:														
Given Name (first and middle [if any])						Family Name or Surname								
Giuseppe					AVELLONE									
Inventor's Signature	Ly. allo								Da	Date 08/01/04				
Residence C	ity	y Palermo State					Country IT			Cit	izenship) ["		
Mailing Addr	ess	Via Paisie	llo, 31											
City	•	Palermo		State			ZIP	1-90	145	Co	untry T			
☑Additional inventors are named on 2 supplemental additional inventor(s) sheet(s) PTO/SB/02A attached														

FEB 2.7 254 (g)

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page __1__ of __2__

Name of Additional Joint Inventor, if any:		A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])			. Family Name or Surname								
Francesco			RIMI								
Inventor's Signature	Free grees	Mulee Date 08/01							3/01/05		
Residence: City	Alcamo (Trapani)	State		Country	,	ΙT	Citize	enship		IT	
Post Office Address	Via Mirrione, 17	a Mirrione, 17									
Post Office Address											
City	Alcamo (Trapani)	State		ZIP		1-91011	Cor	untry	3	IT	
Name of Additional J	loint Inventor, if any:	A petition has been filed for this unsigned inventor									
Given Name (first	and middle [if any])			Fan	nily	Name or	Surna	me			
Fran	cesco	PAPPALARDO									
Inventor's Signature	Stonler	- Jaffall Date 08/01/								7/01/01	
Residence: City	Paternò (Catania)	State	1	Country	Ī	ıT	Citize	nship		ΙΤ	
Post Office Address	Via Madonna della	Scala, 1	0/A								
Post Office Address											
City	Paternò (Catania)	State		ZIP	1-9	95047	Cou	ntry		T	
Name of Additional J	oint Inventor, if any:	A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])			Family Name or Surname								
Agostino			GALLUZZO								
Inventor's Signature	Ajostino Pollino Date 08/01/0,										
Residence: City	Palma di Montechiaro State Country IT Citizenship (Agrigento)							ıΤ			
Post Office Address	Piazza Borsellino, 14										
Post Office Address				· · · · · · · · · · · · · · · · · · ·							
City	Palma di Montechia (Agrigento)	·o	State	ZIF	0	1-9202	20	Count	гу	ΙΤ	

ADDITIONAL INVENTOR(S) **DECLARATION** Supplemental Sheet Page 2 of 2 Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Giuseppe **VISALLI** aspe Wal 8/01/04 inventor's Date Signature State Country Citizenship Residence: City IT IT Via delle Mura, 44 Post Office Address Post Office Address City State ZIP 1-98121 Country Messina IT Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Inventor's Signature Date State Country Citizenship Residence: City Post Office Address Post Office Address City State ZIP Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Inventor's Signature Date State Country Citizenship Residence: City Post Office Address Post Office Address City State ZIP Country